

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

255 332-00002-2

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| | | |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS | 28 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 28 minus 20 = | 8 |
| INDEPENDENT CLAIMS | 5 minus 3 = | 2 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

SMALL ENTITY **OTHER THAN
TYPE**
OR **SMALL ENTITY**

| | |
|-----------|--------|
| RATE | FEE |
| BASIC FEE | 355.00 |
| X\$ 9= | 72 |
| X40= | 80 |
| +135= | |
| TOTAL | 507 |

SMALL ENTITY **OTHER THAN
OR SMALL ENTITY**

| | |
|------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | 81 |
| X40= | |
| +135= | |
| TOTAL ADDIT. FEE | 81 |

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|--------------------------|
| | | | | Minus = |
| Total | 37 | Minus | 28 | 9 |
| Independent | 5 | Minus | 10 | 0 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

SMALL ENTITY **OTHER THAN
OR SMALL ENTITY**

| | |
|------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | 81 |
| X40= | |
| +135= | |
| TOTAL ADDIT. FEE | 81 |

(Column 1) (Column 2) (Column 3)

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|--------------------------|
| | | | | Minus = |
| Total | 10 | Minus | 37 | |
| Independent | 1 | Minus | 5 | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

| | |
|------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | |
| X40= | |
| +135= | |
| TOTAL ADDIT. FEE | |

(Column 1) (Column 2) (Column 3)

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|--------------------------|
| | | | | Minus = |
| Total | | Minus | 28 | |
| Independent | | Minus | 10 | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

| | |
|------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | |
| X40= | |
| +135= | |
| TOTAL ADDIT. FEE | |

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 - If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.